

SERIAL NO. \_\_\_\_\_  
ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	INITIALS	ID NO.	DATE
FEES DETERMINATION	MG		4/10/799
O.I.P.E. CLASSIFIER		16	4/3/99
FORMALITY REVIEW	INMB	108231	4/16/99 10119199

## INDEX OF CLAIMS

✓	Rejected	N	Non-elected
=	Allowed	I	Interference
-	(Through numeral) ... Canceled	A	Appeal
+	Restricted	O	Objected

Claim	Date
1	✓ ✓ ✓ ✓ ✓ ✓
2	✓ - - -
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Claim	Date
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Claim	Date
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If more than 150 claims or 10 actions  
staple additional sheet here